



MISSOURI DEPARTMENT OF TRANSPORTATION

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For Department Use Only ☐ ☐ ☐
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APPLICATION FOR EMPLOYMENT
AN EQUAL OPPORTUNITY/AFFIRMATIVE ACTION EMPLOYER

PLEASE TYPE OR PRINT IN INK.
APPLICATION MUST BE COMPLETED IN ITS ENTIRETY TO BE CONSIDERED.

Name on Your Social Security Card

(Last) _____ (First) _____ (Middle or Initial) _____ Date _____

Social Security Number _____ County of Legal Residence _____

Mailing Address _____
(Street, Route Number, P.O. Box, HRC) (City) (State) (Zip)

Applicant's Email Address _____

Telephone Numbers () _____ () _____
(Number Where You can be Contacted Regarding Employment) (Home)

Are you at least age 18, a high school graduate
or possess a GED? Yes ☐ No ☐

Are you a U.S. citizen? Yes ☐ No ☐

Do you (or your spouse) have any relative(s) employed
by this department? Yes ☐ No ☐
If yes, give name(s) and relationship(s).

If not a citizen, can you submit verification that you are
lawfully available for employment in this country?
Yes ☐ No ☐

Do you possess a valid driver's license? Yes ☐ No ☐
If yes, please designate:

(State) _____ (Number) _____
Have you passed the written portion of the CDL test? _____
Class A _____ Class B _____ Other _____

Date CDL Expires: _____
If you have a valid commercial driver's license (CDL):
What class do you have? _____
What endorsements do you have? _____
What CDL restrictions do you have? _____

SELECT A MAXIMUM OF THREE TYPES OF WORK THAT YOU ARE INTERESTED IN THE LINES PROVIDED BELOW.
(Refer to supplement for answers to commonly asked questions and an explanation of the types of work listed below.)

- | | | |
|---|---|------------------------------------|
| 1. Accounting/Auditing | 13. Custodial | 27. Mechanic/Vehicle Repair |
| 2. Archaeology (Cultural Resources)/
Environmental* | 14. Data Entry Operator* | 28. Paralegal/Legal Assistant |
| 3. Archaeology Technician* | 15. Drafting/CADD | 29. Photography* |
| 4. Attorney | 16. Electrician | 30. Planning Technician |
| 5. Bookkeeping/Payroll | 17. Electronic Repair | 31. Print Shop * |
| 6. Bridge Maintenance/Painting* | 18. General Clerical | 32. Purchasing/Stocking Operations |
| 7. Building Maintenance and Repair | 19. Geologist | 33. Real Estate Acquisition |
| 8. Chemist* | 20. Governmental Affairs* | 34. Risk Management/Safety |
| 9. Civil Engineer** | 21. Highway Construction Technician | 35. Secretarial |
| 10. Computer Information Specialist/
Programmer/System Support | 22. Highway Maintenance | 36. Service Attendant |
| 11. Computer Technician | 23. Human Resources Management | 37. Sign Manufacturing* |
| 12. Core Drill Operation* | 24. Journalism/Public Affairs | 38. Surveying |
| | 25. Legal Secretary | 39. Transportation Planning |
| | 26. Materials Testing/Inspection/Research | |

* These jobs are located at General Headquarters

** Questions regarding civil engineer careers – contact civil engineer recruiter toll free at 1-877-605-1435

1. _____ 2. _____ 3. _____ Other (state **only** specific occupations, if not noted above) _____

INDICATE TYPE(S) OF EMPLOYMENT YOU WILL ACCEPT

- ☐ Full-Time (Ongoing in nature, 40 hours per week)
☐ Seasonal (Hired for a specific period – normally April to October)
☐ Permanent Part-Time (Ongoing position, which works less than 40 hours per week)
☐ Temporary (Hired on an as-needed basis)
☐ Intern (College student with semester hours hired to work mid-May – August, or between semester breaks)
☐ Summer Student
☐ Coop Student (Student in civil engineering, information systems, or business administration who rotates school and work schedule)
☐ Emergency (Hired based on sporadic needs, i.e., snow removal, etc.)

RETURN YOUR APPLICATION, IN PERSON OR BY MAIL, TO YOUR FIRST LOCATION PREFERENCE (SEE PAGE 8 FOR DISTRICT ADDRESSES) WHERE IT WILL BE ENTERED INTO THE DEPARTMENT WIDE SYSTEM AND KEPT ON FILE FOR SIX MONTHS. MAXIMUM OF THREE LOCATIONS ONLY.

- | | | |
|-------------------------------------|---|----------------------------------|
| _____ 1. St. Joseph District | _____ 5. Jefferson City District/
General Headquarters | _____ 8. Springfield District |
| _____ 2. Macon District | _____ 6. St. Louis Metro District | _____ 9. Willow Springs District |
| _____ 3. Hannibal District | _____ 7. Joplin District | _____ 10. Sikeston District |
| _____ 4. Kansas City Metro District | | |

District 5 – Jefferson City District and General Headquarters are considered as one location.

Indicate county or counties where you desire employment if not available for all counties within a district _____

Indicate the number of workdays per month of overnight travel you are willing to accept with a job:

- ☐ None
 ☐ Infrequent (1-3)
 ☐ Moderate (4-10)
 ☐ Extensive (11-19)
 ☐ Full-Time (20-21)

EDUCATION AND TRAINING: ALL APPLICANTS MUST COMPLETE

Attach a reproduced copy of college transcripts, diplomas, certificates, etc.

Type of School	Name of School	City and State	Circle Highest Year Completed				Graduated	Starting Date	Ending Date	Major/Minor
			5	6	7	8				
Grade							XXXX	XXXX	XXXX	XXXX
High School/GED			9	10	11	12	Yes <input type="checkbox"/> No <input type="checkbox"/> GED <input type="checkbox"/>	XXXX	XXXX	XXXX
College			1	2	3	4	Obtained Degree? Yes <input type="checkbox"/> No <input type="checkbox"/>			
College			1	2	3	4	Obtained Degree? Yes <input type="checkbox"/> No <input type="checkbox"/>			
Graduate School			1	2	3	4	Obtained Degree? Yes <input type="checkbox"/> No <input type="checkbox"/>			
Business or Vo-Tech School			1	2	3	4	Obtained Degree? Yes <input type="checkbox"/> No <input type="checkbox"/>			
Correspondence or Night School										

Courses taken: Accounting _____ Algebra _____ Biology _____ CADD/Microstation _____ Calculus _____ Chemistry _____
 Computer Programming _____ Geometry _____ Physics _____ Statistics _____ Trigonometry _____ Other _____

If college credit is earned but no degree, indicate total number of credit hours earned. _____

How many additional credit hours do you need to receive your degree? _____

Indicate any special courses or training programs not reported above that relate to the type of employment you are seeking.

Indicate and explain any work-related skills or experience you have obtained through unpaid work, volunteer work, skills developed as a hobby, etc.

EMPLOYMENT HISTORY: ALL APPLICANTS MUST COMPLETE

List previous employment **beginning with your present or most recent employer.** Show all dates of unemployment. Include any military service, self-employment, and unpaid work experience. Include additional sheets, if necessary.

NOTE: If a resume is attached, the information listed under “Employment Dates” must be filled out in its entirety.

**** You will need to tab through the fields below.**

EMPLOYMENT DATES		DUTIES:
FROM: MO/YR	TO: MO/YR	
EMPLOYER'S NAME		
EMPLOYER'S ADDRESS		
SUPERVISOR'S NAME AND TITLE	TELEPHONE	
YOUR JOB TITLE		
BEGINNING SALARY	ENDING SALARY	
REASON FOR LEAVING		
EMPLOYMENT DATES		DUTIES
FROM: MO/YR	TO: MO/YR	
EMPLOYER'S NAME		
EMPLOYER'S ADDRESS		
SUPERVISOR'S NAME AND TITLE	TELEPHONE	
YOUR JOB TITLE		
BEGINNING SALARY	ENDING SALARY	
REASON FOR LEAVING		
EMPLOYMENT DATES		DUTIES:
FROM: MO/YR	TO: MO/YR	
EMPLOYER'S NAME		
EMPLOYER'S ADDRESS		
SUPERVISOR'S NAME AND TITLE	TELEPHONE	
YOUR JOB TITLE		
BEGINNING SALARY	ENDING SALARY	
REASON FOR LEAVING		

**EMPLOYMENT HISTORY: ALL APPLICANTS MUST COMPLETE
CONTINUATION**

EMPLOYMENT DATES		DUTIES:
FROM: MO/YR	TO: MO/YR	
EMPLOYER'S NAME		
EMPLOYER'S ADDRESS		
SUPERVISOR'S NAME AND TITLE	TELEPHONE	
YOUR JOB TITLE		
BEGINNING SALARY	ENDING SALARY	
REASON FOR LEAVING		
EMPLOYMENT DATES		DUTIES:
FROM: MO/YR	TO: MO/YR	
EMPLOYER'S NAME		
EMPLOYER'S ADDRESS		
SUPERVISOR'S NAME AND TITLE	TELEPHONE	
YOUR JOB TITLE		
BEGINNING SALARY	ENDING SALARY	
REASON FOR LEAVING		
EMPLOYMENT DATES		DUTIES:
FROM: MO/YR	TO: MO/YR	
EMPLOYER'S NAME		
EMPLOYER'S ADDRESS		
SUPERVISOR'S NAME AND TITLE	TELEPHONE	
YOUR JOB TITLE		
BEGINNING SALARY	ENDING SALARY	
REASON FOR LEAVING		

Date you can begin employment: _____ **Minimum salary willing to accept?** _____

May our department contact your current employer? Yes ☐ No ☐

SPECIAL SKILLS – LABOR AND TRADES: ONLY APPLICANTS SEEKING EMPLOYMENT IN LABOR AND TRADE JOBS ARE REQUIRED TO COMPLETE THIS SECTION (HIGHWAY MAINTENANCE, MECHANICS, ETC.)

Check any of the following skills that you have, based on training or experience:

- | | | |
|---|---|--|
| <input type="checkbox"/> Auto/Truck Major Mechanical Repair | <input type="checkbox"/> Operate Backhoe | <input type="checkbox"/> Operate Pickup Truck |
| <input type="checkbox"/> Auto/Truck Minor Mechanical Repair | <input type="checkbox"/> Operate Dump Truck | <input type="checkbox"/> Operate Snowplow |
| <input type="checkbox"/> Carpentry | <input type="checkbox"/> Operate Farm Tractor | <input type="checkbox"/> Operate Tractor/Trailer Truck |
| <input type="checkbox"/> Core Drill Operation | <input type="checkbox"/> Operate Front End Loader | <input type="checkbox"/> Sandblasting |
| <input type="checkbox"/> Electrician | <input type="checkbox"/> Operate Heavy Excavation Equipment | <input type="checkbox"/> Structural Steel Painting |
| <input type="checkbox"/> Jackhammer Operation | <input type="checkbox"/> Operate Light Excavation Equipment | <input type="checkbox"/> Surveying |
| <input type="checkbox"/> Landscape Construction/Maintenance | <input type="checkbox"/> Operate Motorgrader | <input type="checkbox"/> Welding |
| | | <input type="checkbox"/> Other Skills _____ |

SPECIAL SKILLS – CLERICAL: ONLY CLERICAL APPLICANTS ARE REQUIRED TO COMPLETE THIS SECTION

Check any of the following skills that you have, based on training or experience:

- | | | | |
|---|--|---|--|
| <input type="checkbox"/> Applications: Spreadsheet/Database | <input type="checkbox"/> Word Processing | <input type="checkbox"/> Telephone/Receptionist | <input type="checkbox"/> 10-Key Data Entry |
| <input type="checkbox"/> Bookkeeping | <input type="checkbox"/> Shorthand/Transcription | <input type="checkbox"/> Typewriter (WPM) _____ | <input type="checkbox"/> Other _____ |

PROFESSIONAL CREDENTIALS: ONLY APPLICANTS SEEKING A JOB NORMALLY REQUIRING PROFESSIONAL CREDENTIALS ARE TO COMPLETE THIS SECTION

- | | | |
|---------------------------------|--|---|
| Registered Engineer | Yes <input type="checkbox"/> No <input type="checkbox"/> | If yes, list State and Reg. No. _____ |
| Engineer in Training | Yes <input type="checkbox"/> No <input type="checkbox"/> | If yes, indicate Enrollment No. _____ |
| Registered Land Surveyor | Yes <input type="checkbox"/> No <input type="checkbox"/> | If yes, list State and Reg. No. _____ |
| Licensed Attorney | Yes <input type="checkbox"/> No <input type="checkbox"/> | If yes, list State and License No. _____ |
| Certified Real Estate Appraiser | Yes <input type="checkbox"/> No <input type="checkbox"/> | If yes, indicate State, General, or Residential _____ |
| NICET Certification | Yes <input type="checkbox"/> No <input type="checkbox"/> | If yes, indicate level _____ |
| Other Licenses or Registrations | _____ | |

MILITARY RECORD: ALL APPLICANTS MUST COMPLETE

- If you are a male between 18 and 26 years of age, have you registered with the Selective Service System? Yes ☐ No ☐
- Have you ever served in the U.S. Military Service? Yes ☐ No ☐
- If yes: a) Are you an honorable discharged veteran? Yes ☐ No ☐
- b) State branch and period of active service

(Branch)

(Period of Active Service)

NOTE: A dishonorable or general discharge is not an absolute bar to employment and other factors will affect the final decision regarding employment.

APPLICANT'S SIGNATURE: APPLICANT MUST SIGN APPLICATION

I understand that my application will be **active for six months** and, upon my request, is renewable for an additional six months. I certify that the information provided herein is true and complete to the best of my knowledge. I understand misrepresentation or omission of information on this application and/or inserts, including relatives working for the department, educational attainments, work history, professional credentials, etc. is cause for rejection of my application or subsequent dismissal from employment.

(Signature)

**PRINT FORM, THEN SIGN WITH BLUE PEN BEFORE
SUBMITTING TO MODOT – HUMAN RESOURCES**

Failure to complete and sign the application and the following form: "DRUG TESTING, ALCOHOL TESTING, AND PRE-EMPLOYMENT, POST-OFFER MEDICAL EXAMINATION CONSENT; AND AUTHORIZATION TO RELEASE INFORMATION CONSENT", will cause your application to not be considered for employment.

MISSOURI DEPARTMENT OF TRANSPORTATION

This form must be completed and returned with your application. Please be sure to sign and date.

DRUG TESTING, ALCOHOL TESTING, AND PRE-EMPLOYMENT, POST-OFFER MEDICAL EXAMINATION CONSENT

Drug Testing: It is the intent of the Missouri Department of Transportation to provide a drug-free workplace to protect the health and safety of employees and the general public. All applicants offered employment with the department must successfully pass a urine specimen drug test, at department expense. Applicants who fail the drug test, or applicants who refuse to be tested or fail to report for a drug test, will not be considered again for employment for a 12-month period. I understand that any employment offer will be contingent upon my passing the drug test.

Alcohol Testing: I understand if I am employed in a job requiring a commercial driver's license at the time of my termination from the Missouri Department of Transportation, the department has my permission to release any drug test and/or alcohol test results to an employer requesting this information.

Pre-Employment, Post-Offer Medical Examination: Applicants offered employment with the Missouri Department of Transportation are required to submit to a medical examination, at department expense, to determine if they are able to perform all essential job duties, with or without reasonable accommodation, to ensure the safety, health, and welfare of department employees and the general public. I understand that any employment offer will be contingent upon the successful completion of this pre-employment, post-offer medical examination.

AUTHORIZATION TO RELEASE INFORMATION CONSENT

I hereby request and authorize you to furnish the Missouri Department of Transportation with any and all information they may request concerning my employment record, driving record, education record, military record, and the release of any information pertaining to drug and/or alcohol testing and physical exam results with a previous employer. This authorization is specifically intended to include any and all information of a confidential or privileged nature as well as photocopies of such documents, if requested. The information will be used for the purpose of determining my eligibility for employment with the Missouri Department of Transportation.

I hereby release you and your organization from any liability which would result from furnishing the information requested above or from any subsequent use of such information in determining my qualifications to serve as an employee of the Missouri Department of Transportation.

Applicant's Printed Name _____ Social Security No. _____
(Last) (First) (Middle or Initial)

If you were previously employed under a different name(s), please specify _____

**PRINT FORM, THEN SIGN SIGNATURE WITH BLUE PEN
BEFORE SUBMITTING TO MODOT – HUMAN RESOURCES**

Applicant's Signature _____ Date _____

MISSOURI DEPARTMENT OF TRANSPORTATION

AFFIRMATIVE ACTION SURVEY

Data provided below is **voluntary** and is not required in order to submit an Application for Employment. This data will assist the department in analyzing affirmative action statistics.

NOTE: This portion of the application will be removed and retained separate from the application files.

Name _____ Social Security No. _____
(Last) (First) (Middle or Initial)
Date Completed _____ Date of Birth _____

Sex: Male ☐ Female ☐

Race/Ethnic Group

- ☐ **Caucasian (White)**
All persons having origins in any of the original peoples of Europe, North Africa, or the Middle East.
- ☐ **African-American**
All persons having origins in any of the black groups of Africa, as well as those identified as Jamaican, Trinidadian, and West Indian.
- ☐ **Hispanic (Spanish American)**
All persons of Mexican, Puerto Rican, Cuban, Central American, South American, or other Spanish culture or origin, regardless of race.
- ☐ **American Indian and Alaskan Native**
All persons having origins in any of the original peoples of North America and who maintain cultural identification through tribal affiliation or community recognition, including Eskimos and Aleuts.
- ☐ **Asian and Pacific Islanders**
All persons having origins in any of the original peoples of the Far East, Southeast Asia, the Indian Subcontinent, and the Pacific Islands. This includes for example, Chinese, Japanese, Korean, Filipino, East Indian, Pakistani, Samoan, Malaysians, Thais, etc.

Check any Applicable

- ☐ **Vietnam Era Veteran**
Any part of military service which was during the period August 5, 1964, through May 7, 1975, with active duty service of more than 180 days and discharged or released with other than a dishonorable discharge or was discharged or released from active duty because of a service connected disability.
- ☐ **Disabled Veteran**
Discharged or released from military service because of service connected disability, or rated 30% or more disabled, or rated 10 or 20% disabled under 38 U.S.C., Section 1506, to have a serious employment disability.

Indicate what prompted you to apply for employment with the department:

- | | |
|--|---|
| <input type="checkbox"/> No one referred me, just familiar with the department | <input type="checkbox"/> Referred by the Missouri Division of Employment Security |
| <input type="checkbox"/> Referred by a Friend | <input type="checkbox"/> Newspaper Advertisement |
| <input type="checkbox"/> Referred by a Department Employee | <input type="checkbox"/> A Job Opportunity Announcement |
| <input type="checkbox"/> Recruited by a Department Representative | <input type="checkbox"/> Referred by a Teacher |
| <input type="checkbox"/> Internet | <input type="checkbox"/> College Campus Recruitment |
| <input type="checkbox"/> Career Fair | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Involved in Transportation and Civil Engineering Program (TRAC) | |

MISSOURI DEPARTMENT OF TRANSPORTATION

GENERAL HEADQUARTERS AND DISTRICT OFFICE ADDRESSES

General Headquarters

Missouri Department of Transportation
105 West Capitol Avenue
P.O. Box 270
Jefferson City, Missouri 65102
Toll Free 1-877-605-1435 (Human Resources)

District 1

Missouri Department of Transportation
3602 North Belt Highway
P.O. Box 287
St. Joseph, Missouri 64502
(816) 387-2350

District 6 – St. Louis Metro District

Missouri Department of Transportation
1590 Woodlake Drive
Chesterfield, Missouri 63017-5712
(314) 340-4100
(314) 340-4115 (Human Resources)

District 2

Missouri Department of Transportation
902 North Missouri Street
P.O. Box 8
Macon, Missouri 63552
(660) 385-3176

District 7

Missouri Department of Transportation
3901 East 32nd Street
P.O. Box 1445
Joplin, Missouri 64802
(417) 629-3300

District 3

Missouri Department of Transportation
1711 South Highway 61
P.O. Box 1067
Hannibal, Missouri 63401
(573) 248-2490

District 8

Missouri Department of Transportation
3025 East Kearney
M.P.O. Box 868
Springfield, Missouri 65801
(417) 895-7600

District 4 – Kansas City Metro District

Missouri Department of Transportation
600 Northeast Colbern Road
Lee's Summit, Missouri 64086
(816) 622-6500

District 9

Missouri Department of Transportation
910 Springfield Road
P.O. Box 220
Willow Springs, Missouri 65793
(417) 469-3134

District 5

Missouri Department of Transportation
1511 Missouri Boulevard
P.O. Box 718
Jefferson City, Missouri 65102
(573) 751-3322

District 10

Missouri Department of Transportation
2675 North Main Street
P.O. Box 160
Sikeston, Missouri 63801
(573) 472-5333

If you have special needs addressed by the Americans with Disabilities Act, please notify the appropriate district office or General Headquarters. If you are hearing or speech impaired, please contact the Missouri Relay System by calling 1-800-735-2966.